File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319

Fax: 515-281-4073

## FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees of for state office must be filed electronically and effective January 1, 2012, all I JAN 18 AM 10: 48 statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically. COMMITTEE NAME (Must be same as on Statement of Organization) Committee to reelect Margaret Borgen FORM IMPORTANT: Indicate by # type of committee you are reporting for: DR-2 DISCLOSURE (Rev. 12/2009) REPORT For Office Use Orliv CANDIDATE COMMITTEES ONLY: Comm # Candidate Name Political Party (if applicable) Margaret Borgen Office Sought Des Moines School Boad Computer District (if Senate or House) Audited Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 688.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 515-246-6825 SIGNATURE OF PERSON FILLER REPORT TELEPHONE DATE SIGNED I AM FILING A 1-19-2011 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate by # 2 ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.) County & Local Committees, enter County in which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ......\$ 212.24 ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 55.00 Schedule F: Loans Received total (Attach Schedule F)..... 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... 0.00 (Schedule H applies to Candidates' Committees Only) 267.24 SUB-TOTAL..... SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)...... 0.00 Schedule F: Loan Repayments total (Attach Schedule F)..... 0.00 CASH ON HAND at the end of this reporting period (if final report balance must be zero) ......\$ 267.24 \*\*UNPAID BILLS (From Schedule D - Attach Schedule D)......\$ 0.00 \*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)......\$ 0.00 \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ 0.00 CONSULTANT BREAKDOWN (Schedule G Attached?) YES CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) 0.00 STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

## CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Committee to reelect Margaret Borgen COMMITTEE NAME (Must be same as on Statement of Organization)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FO FUND RAISE
	ID# CK# <sub>cash</sub>	US Bank Des Moines, Ia / Refund service charge	None	\$55.00	INCOM
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			SUB-TOTAL S	55.00	
		TOTAL (if last page o	f this echadula)	55.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)